## **Application Data Sheet**

### **Application Information**

Application number::

Filing Date::

Application Type::

Regular

Subject Matter::

Utility

Suggested classification::

Suggested Group Art Unit::

CD-ROM or CD-R??::

Number of CD disks::

Number of copies of CDs::

Sequence Submission::

Computer Readable Form (CRF)?::

Number of copies of CRF::

Title::

SYSTEMS AND METHODS FOR

OVERCOMING STICTION

Attorney Docket Number::

19930-002800

Request for Early Publication::

No

Request for Non-Publication::

No

Suggested Drawing Figure::

1

Total Drawing Sheets::

14

Small Entity?::

Yes

Latin name::

Variety denomination name::

Petition included?::

No

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers One::

Secrecy Order in Parent Appl.::

No

**Applicant Information** 

Applicant Authority Type::

Inventor

Primary Citizenship Country::	US
-------------------------------	----

Status:: Full Capacity

Given Name:: David

Middle Name::

Family Name:: Miller

Name Suffix::

City of Residence:: Louisville

State or Province of Residence:: CO

Country of Residence:: US

Street of Mailing Address:: 1035 South Boulder Road, #115

City of Mailing Address:: Louisville

State or Province of mailing address:: CO

Country of mailing address::

Postal or Zip Code of mailing address:: 80027

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Lilac

Middle Name::

Family Name:: Muller

Name Suffix::

City of Residence:: Nederland

State or Province of Residence:: CO

Country of Residence:: US

Street of Mailing Address:: 241 Alpine

City of Mailing Address:: Nederland

State or Province of mailing address:: CO

Country of mailing address::

Postal or Zip Code of mailing address:: 80466

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Robert

Middle Name:: L.

Family Name:: Anderson

Name Suffix::

City of Residence:: Boulder

State or Province of Residence:: CO

Country of Residence:: US

Street of Mailing Address:: 1011 Rainbow Way

City of Mailing Address:: Boulder

State or Province of mailing address:: CO

Country of mailing address::

Postal or Zip Code of mailing address:: 80303

# **Correspondence Information**

Correspondence Customer Number:: 20350

#### Representative Information

Representative Designation:: Representative Number:: Representative Name::

Primary 28,572 David N. Slone

Associate 47,629 Douglas M. Hamilton

## **Domestic Priority Information**

Application:: Continuity Type:: Parent Application:: Parent Filing Date::

#### **Foreign Priority Information**

Country:: Application number:: Filing Date::

# **Assignee Information**

Assignee Name:: Network Photonics, Inc.

Street of mailing address:: 4775 Walnut Street, Suite C

City of mailing address:: Boulder

State or Province of mailing address:: Colorado

Country of mailing address:: USA

Postal or Zip Code of mailing address:: 80301